CFBHPP Committee

Meeting Summary Conference Room C – Henrico CSB April 12, 2007

I. Welcome and Introductions

Brian welcomed members to the meeting. Motion to accept Don, seconded by Barry, minutes accepted. The other item of business included a discussion about the Foster Care Prevention Policy for Children Funded through CSA as delineated in a memorandum from VDSS, DMHMRSAS, and the Office of Comprehensive Services. Secretary Tavenner directed corrective actions necessary to ensure compliance with current law. Guidelines have been developed and OCS will present the proposed guidelines to the State Executive Council at its April 18 meeting. Following a 60 day public comment period, revised guidelines will be presented to the SEC for final action at its July meeting. Wayne Barry introduced Susan Truelove, DOE, working on a guidance document related to significant changes in special education law and the suggestion made that Susan do a presentation for the committee.

Non-funding recommendations:

- 1) We support the effort/new regulations and policies and look forward to their implementation.
- 2) DOE and DMHMRSAS including Child and Family Council, to work together to form a workgroup, to include private providers to survey currently, existing public and private provision of mental health/behavioral health services in schools, both public and private, and needs/gaps/needs assessment.
- 3) Develop and implement multiple-risk screening instrument across systems for pregnant and parenting women.
- 4) Medicaid regulations cover the full continuum of services (can be re-visited in May)
- 5) Develop professional standards/core competencies for adolescent-specific services
- 6) Move EI services in Medicaid from Outpatient Rehab to EPSDT
- 7) Amend the Medicaid state plan
- 8) Draft and implement programmatic standards including MH credentials and staff: juvenile ratio by 6/30/09

9) DMHMRSAS, DJJ and DOE and private providers workgroup to recommend how to treat JJ psychiatric population on a long term basis.

II. 2007 Report and Recommendations

Training

Training slots for child psychiatry and child psychology interns (Continue \$493,000 and add \$800,000)

\$800,000

OCFS/system Infrastructure

1. Prevention programs for pregnant women and women of childbearing years

FY08 \$141,500 FY 09 \$2.5 million

- Include what types of prevention services are included in the proposal to strengthen it.
- Recommendations focus on structure and system development.
- Take out pre-natal substance abuse and use a universal approach
- 2. OCFS staff-

Including TA, Family support specialist, autism, Adolescent Substance Abuse (Project TREAT), OSS, conference \$758,122

Note: need to move some of the prevention program infrastructure down into the OCFS staff to provide a more complete picture of the infrastructure needs.

Families – see handout

1.5 FTE positions for resource coordination, data entry, family education, admin assistant @ \$90,000

Behavioral health screening for all kids.

Substance-exposed newborn

- 1. \$30,000 for TA to develop strategic plan to address substance-exposed newborn needs including implementation BH screening
- 2. Fund 3 new project LINK sites @ \$375,000
- 3. Fund residential treatment for co-occurring mental health/substance-using pregnant women @ \$1 million first year \$500,000 ongoing

4. Expand MCO coverage for BH screening and opiate-dependent pregnant women

Child and Adolescent SA

- 1. Fund non-Medicaid clinic/CSB outpatient services \$2,988,000
- 2. Fund residential SA

\$1.5 million

- 3. Early intervention services for children and adolescents who are using/experimenting with substances.
- 4. After care/recovery support services

CSACSB subcommittee

- 1. CSB or independent entity assesses for level of care or who does it?
- 2. Role of CSBs in system of care as conceptualized by/in CSA
- 3. CSBs in a utilization management role in CSA
- 4. Care management/discharge planning

Hold for May meeting.

MR/EI

MR

1) Fund 580 children's slots for MR waiver

\$17 million

2) Provide flexible family support for families without waiver services

\$2.5 million in FY 08 \$5 million in FY 09

3) Funding for mid-level MR services to assist in keeping kids in homes [in larger recommendation for mid-level services] including kids involved in JJ system

Increase funding for EI Birth-3 (8% growth (800 new kids)

\$2.4 million

2) Create 3 Centers of BH Excellence

CCCA, SWMHI, VTCC

Training/consultation/telemedicine/specialized services

\$700,000

3) Fund SOC concept projects within CSBs including evidence-based and promising practices \$3.5 million in FY 08 and \$5 million in FY 09

Services – Capacity development

\$20 million FY 08 \$40 million in FY09 1. Funding for mid-level and SOC services that include EB and Promising Practices minimum array of services at each CSB

Public-private partnerships, private providers may apply

RFP process, private providers may apply

Wrap- around, day treatment for MR, SA, and MR, after school BH program, crisis intervention, respite care, family support, adolescent detoxification and SA Include MH, MR, SA, DD/Autism and co-occurring disorders, and behavioral disorders (JJ)

CSBs have infrastructure for child-specific assessment and child-specific case management

Autism - non-funding

- 1. Training
- 2. Funding for Services
- 3. A home at state, combine with DD services

Must be funded

Infrastructure

Autism coordinator

TA people to train

Support staff and resources

Within OCFS

Local infrastructure

Add bullet to 10 year plan children are born healthy and drug-free under Goal #1

Juvenile Justice

2) New BH position for _____detention centers according to population in the 10 year Plan. Evaluate the need for additional staff according to population and make recommendations for additional funding to address service gaps and report by June 30, 2008.

Evaluation of DJJ/MH centers and identify

Votes:

15 for Child Psychiatrists training slots 8 for 3 Centers of Excellence 13 for SOC 4 for SE newborn strategic plan 1 for LINK expansion 1 for residential treatment center for SA

0 for screening

7 for outpatient services

2 for residential treatment

25 for mid-level services

8 Urgent wait lists for MR slots

11 family supports

8 for EI

9 for infrastructure

11 for family support

Clear winners:

Mid-level services \$20-40 million
Training slots \$800,000
System of Care projects \$3.5-5 million (Move this to mid-level services)
Families \$100,000
MR Family Support \$2.5-5 million

First Year Total Second Year Total

\$37.0 million \$68.0 million

6. OCFS \$758,000 7. 3 centers \$700,000

7. MR wavier slots \$6 million - \$12 million

(200 slots first year and 200 in the second year)

7. Early intervention \$24 million

(Add \$30,000 for TA for SE infants)

10. Outpatient SA services \$3 million

10. Prevention programs for pregnant women \$141,000- \$2.5 million

Motion to adjourn made by Don and seconded by Gina.

Writing Committee

Meeting Notes April 12, 2007

- All writers need to send electronic versions to MAD
- Pat Cullen needs to revise and send electronic copy to MAD
- Substance exposed information from Malcolm
- Juvenile Justice- Jeanette DuVal
- Autism training and we support Joint Commission Work
- Brian sent the global piece capacity, capacity, capacity
- Foster Care policy needs to be added to Don's revision

Time lines:

Notice to writing committee, all revisions etc within two weeks -Monday April $23^{\rm rd}$ by Noon.

E-mail 10 recommendations to Brian